1 of 4 + Q

UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

12 CV 7481

	THE TOTAL TOTAL						
2	1cky CDAVO						
(In the	space above enter the full name(s) of the plaintiff(s).)	COMPLAINT					
	-against-						
P	PANI CASEY	Jury Trial: ☐ Yes ☐ No (check one)					
cannot j please w sheet of caption	space above enter the full name(s) of the defendant(s). If you fit the names of all of the defendants in the space provided, write "see attached" in the space above and attach an additional paper with the full list of names. The names listed in the above must be identical to those contained in Part I. Addresses should ncluded here.)	DECEIVED OCT - 4 2012 PRO SE OFFICE V					
I.	Parties in this complaint:						
A.	st your name, address and telephone number. If you are presently in custody, include your entification number and the name and address of your current place of confinement. Do the same rany additional plaintiffs named. Attach additional sheets of paper as necessary.						
Plaintifi	Street Address 73 - 17 - 170 3	5 6 -1197					
В.	List all defendants. You should state the full name of t	he defendant over if that defendant is					

B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Case 1:12-cv-0748 PC-MHD Document 2 Filed 10/04/12 Page 2 of 4

Defen	dant No. 1	Name PAUL CASey				
DOICH	WEELE TYO, 1	Street Address MIDJUNI NORTH Precect				
,		County, City State & Zip Code				
		Telephone Number				
	•					
Defen	dant No. 2	Name				
		Street Address				
		County, City				
		State & Zip Code				
		Telephone Number				
Defen	dant No. 3	Name				
		Street Address				
		County, City				
		State & Zip Code				
		Telephone Number				
Defendant No. 4		Name				
		Street Address				
		County, City				
		State & Zip Code				
		Telephone Number				
II.	Basis for Jur	isdiction:				
Under	28 U.S.C. § 13	arts of limited jurisdiction. Only two types of cases can be heard in federal court: cases uestion and cases involving diversity of citizenship of the parties. Under 28 U.S.C. ing the United States Constitution or federal laws or treaties is a federal question case. 332, a case in which a citizen of one state sues a citizen of another state and the amount lan \$75,000 is a diversity of citizenship case.				
A.	What is the ba	asis for federal court jurisdiction? (check all that apply)				
	Federal Q					
В.	If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue?					
		· · · · · · · · · · · · · · · · · · ·				
C.	Plaintiff(s) sta	r jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party? te(s) of citizenship				
	Detendant(s) s	state(s) of citizenship				

III. Statement of Claim:

State as briefly as possible the <u>facts</u> of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

	A.	Where did the events giving rise to your claim(s) occur? <u>SH</u> カソル ロロロ
		50 th of my my 53 pm on 8-8-12
	B.	What date and approximate time did the events giving rise to your claim(s) occur? $8-812$
		3.30 pm
	C.	Facts: Two practicity my Publimars
What happened to you?		For A Bublic Access TV SHOW
Who did what?		I DO AS A Producer A MNV
		IV markataw, when oficer
Was anyon else involved?	e	Chrsey Appointed me pro put
	——————————————————————————————————————	THAT COURS ON ME DUD Sharge
Who else saw what happened?		Me with Play 3 CARD hover
		18 gambelies game
	IV.	Injuries:
	If y	ou sustained injuries related to the events alleged above, describe them and state what medical treatment, ny, you required and received.
•		

V .	Relief:							
seeking	what you want the C g, and the basis for s	Court to do for you and uch compensation.	the ar	nount of \mathcal{M}	moneta	ary compe کس پ	ensation, if	any, you are
		•	·					
		,		······································			···	
				······································				
							· · · · · · · · · · · · · · · · · · ·	

				7112			· · · · · · · · · · · · · · · · · · ·	
		4	·					

		perjury that the forego	oing is	true and	d corre	ect.		
Signed	this 4 day of 6	ct, 201.2)	c &	/	
			h	K1)	10		a particular particula	
		Signature of Plaintif	f //	10				
		Mailing Address		135		> - 1	10 5	
			" —	-20	77 ,	$\frac{1}{1}$	2600	10mg
		Telephone Number		71	1 7	1110	110	7
		Fax Number (if you	have i	> 7 / nel	· «_	- 7 <i>3</i> -	- 1 (1	
		- William (g your	murc (<i></i>			· · · · · · · · · · · · · · · · · · ·	
Note:	All plaintiffs named also provide their in	in the caption of the commate numbers, present p	plaint lace o	must dat f confine	e and s ment, a	ign the co	mplaint. Piss.	risoners must
For Pri	soners:							
complai	e under penalty of pe nt to prison authoriti n District of New Yo	es to be mailed to the P	day of <i>ro Se</i>	Office of	f the U	, 20 nited State)_/, Tam des District (elivering this Court for the
w taiVii	~ worker of 140W IC	u.		1.	į.	r ' >	フノ	
		Signature of Plaintiff	: <i>[</i>	1/1/2				
		Inmate Number				"		- CONTRACTOR - CON